



09-15-04 Page 1 of 2

JPW

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| APPLICATION NUMBER | FILING OR 371 (c) DATE | FIRST NAMED APPLICANT | ATTORNEY DOCKET NUMBER |
|--------------------|------------------------|-----------------------|------------------------|
| 10/709,142 | 04/15/2004 | Klaus SCHAUER | CXT-091 |

00959
LAHIVE & COCKFIELD, LLP.
28 STATE STREET
BOSTON, MA 02109

CONFIRMATION NO. 3141

FORMALITIES LETTER



OC000000013072242

Date Mailed: 06/25/2004

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

09/17/2004 MNEKONEN 00000055 120080 10709142

01 FC:1051 130.00 DA

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

Items Required To Avoid Abandonment:

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.

SUMMARY OF FEES DUE:

Total additional fee(s) required for this application is \$130 for a Large Entity

- \$130 Late oath or declaration Surcharge.

Replies should be mailed to: Mail Stop Missing Parts
Commissioner for Patents
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Alexandria VA 22313-1450

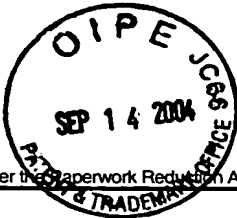
*A copy of this notice **MUST** be returned with the reply.*

B.H.

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE



PTO/SB/21 (04-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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| | | | |
|---|----------------------|------------------------|---------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/709142-Conf. #3141 | |
| | Filing Date | April 15, 2004 | |
| | First Named Inventor | Klaus E. SCHAUER | |
| | Art Unit | 2661 | |
| | Examiner Name | Not Yet Assigned | |
| Total Number of Pages in This Submission | 15 | Attorney Docket Number | CXT-091 |

ENCLOSURES (Check all that apply)

| | | |
|--|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): Combined Declaration and Power of Attorney Part 2 Copy of Notice Return Receipt Postcard |
| Remarks | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

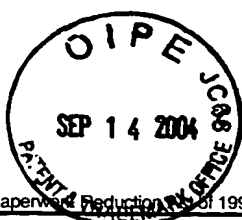
| | |
|-------------------------------|---|
| Firm or Individual name | LAHIVE & COCKFIELD, LLP John D. Lanza - 40,060 |
| Signature | |
| Date | September 14, 2004 |

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL 981582643 US, in an envelope addressed to: MS Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: September 14, 2004

Signature:

(John D. Lanza)



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| | | | | |
|--|--|--------------------------|-----------------------|---------|
| FEE TRANSMITTAL for FY 2004 <small>Effective 10/01/2003. Patent fees are subject to annual revision.</small> | | Complete if Known | | |
| | | Application Number | 10/709142-Conf. #3141 | |
| | | Filing Date | April 15, 2004 | |
| | | First Named Inventor | Klaus E. SCHAUER | |
| | | Examiner Name | Not Yet Assigned | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | Art Unit | 2661 | |
| TOTAL AMOUNT OF PAYMENT (\$) | | 240.00 | Attorney Docket No. | CXT-091 |

| | | | | | |
|---|--------------|------------------------------------|----------------|--|----------|
| METHOD OF PAYMENT (check all that apply) | | FEE CALCULATION (continued) | | | |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None | | 3. ADDITIONAL FEES | | | |
| <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP | | | | | |
| The Director is authorized to: (check all that apply) | | | | | |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments | | | | | |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) | | | | | |
| <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. | | | | | |
| FEE CALCULATION | | | | | |
| 1. BASIC FILING FEE | | | | | |
| Large Entity | Small Entity | | | | |
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description | Fee Paid |
| 1001 | 770 | 2001 | 385 | Utility filing fee | |
| 1002 | 340 | 2002 | 170 | Design filing fee | |
| 1003 | 530 | 2003 | 265 | Plant filing fee | |
| 1004 | 770 | 2004 | 385 | Reissue filing fee | |
| 1005 | 160 | 2005 | 80 | Provisional filing fee | |
| SUBTOTAL (1) (\$) | | | | | 0.00 |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE | | | | | |
| Total Claims | ** = | Extra Claims | Fee from below | Fee Paid | |
| Independent Claims | ** = | | | | |
| Multiple Dependent | | | | | |
| Large Entity | Small Entity | | | | |
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description | |
| 1202 | 18 | 2202 | 9 | Claims in excess of 20 | |
| 1201 | 86 | 2201 | 43 | Independent claims in excess of 3 | |
| 1203 | 290 | 2203 | 145 | Multiple dependent claim, if not paid | |
| 1204 | 86 | 2204 | 43 | ** Reissue independent claims over original patent | |
| 1205 | 18 | 2205 | 9 | ** Reissue claims in excess of 20 and over original patent | |
| SUBTOTAL (2) (\$) | | | | | 0.00 |
| **or number previously paid, if greater; For Reissues, see above | | | | | |
| | | Other fee (specify) | | | |
| | | *Reduced by Basic Filing Fee Paid | | | |
| SUBTOTAL (3) (\$) | | | | | 240.00 |

| | | | |
|---------------------|---------------|-----------------------------------|--------------------|
| SUBMITTED BY | | (Complete if applicable) | |
| Name (Print/Type) | John D. Lanza | Registration No. (Attorney/Agent) | 40,060 |
| Signature | | Telephone | (617) 227-7400 |
| | | Date | September 14, 2004 |

| | |
|---|-----------------------------|
| I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL 981582643 US, in an envelope addressed to: MS Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below. | |
| Dated: September 14, 2004 | Signature: (John D. Lanza) |

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Dated: September 14, 2004 Signature: _____

(John D. Lanza)

Docket No.: CXT-091
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Klaus E. Schauser *et al.*

Application No.: 10/709142

Filed: April 15, 2004

For: METHODS AND APPARATUS FOR
SYNCHRONIZATION OF DATA SET
REPRESENTATIONS IN A BANDWIDTH-
ADAPTIVE MANNER

Confirmation No.: 3141

Art Unit: 2661

Examiner: Not Yet Assigned

RESPONSE TO NOTICE TO FILE MISSING PARTS OF APPLICATION

MS Missing Parts
Commissioner for Patents
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Alexandria, VA 22313-1450

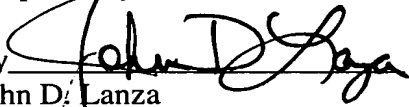
Dear Sir:

In response to the Notice to File Missing Parts of Application – Filing Date Granted mailed June 25, 2004, Applicant respectfully submits a Combined Declaration and Power of Attorney and Part 2 Copy of Notice.

Please charge our Deposit Account No. 12-0080 in the amount of \$240.00 covering the fee set forth in 37 CFR 1.16(e), 1.17(a)(1). The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 12-0080, under Order No. CXT-091. A duplicate copy of this paper is enclosed. Applicants request any extensions of time necessary to respond.

Dated: September 14, 2004

Respectfully submitted,

By 
John D. Lanza
Registration No.: 40,060
LAHIVE & COCKFIELD, LLP
28 State Street
Boston, Massachusetts 02109
(617) 227-7400
(617) 742-4214 (Fax)
Attorney/Agent For Applicant